



INDIANA ENVIRONMENTAL STEWARDSHIP PROGRAM ANNUAL PERFORMANCE REPORT

State Form 53475 (11-07)

INDIANA DEPARTMENT OF ENVIRONMENTAL MANAGEMENT
ENVIRONMENTAL STEWARDSHIP PROGRAM

Indiana Department of Environmental Management
Office of Pollution Prevention and Technical Assistance
100 North Senate Avenue IGCS W041
Indianapolis, IN 46204-2251
Telephone: (800) 988-7901
FAX: (317) 233-5627
E-mail: esp@idem.IN.gov
www.in.gov/idem/prevention/esp

When to use this annual report form...

STOP! Is your facility a member of the U.S. Environmental Protection Agency's National Environmental Performance Track and Indiana Environmental Stewardship Program? If so, please use the U.S. EPA National Environmental Performance Track Annual Performance Report form available at <http://www.epa.gov/performance/track/program/report.htm>. The U.S. EPA will notify IDEM after receiving your annual performance report.

GO! Please use this annual report form if you are only a member of the Indiana Environmental Stewardship Program and not a member of the National Environmental Performance Track. Your Annual Performance Report should be reviewed and signed by a senior manager at your facility prior to submittal. Once signed, fax, mail, or e-mail the report to IDEM. If you have any questions, please contact the ESP Program Manager at 800-988-7901.

The Indiana Environmental Stewardship Program (ESP) Annual Performance Report should demonstrate progress toward objectives and targets AND certify ESP requirements continue to be achieved. The Annual Performance Report should cover the twelve (12) month calendar year and include the status of projects committed to in your facility's original ESP application, results of completed projects, and assurance that an annual internal environmental management system audit was conducted by your facility. Indiana ESP facilities must submit an Annual Performance Report by April 1st of every year, for each calendar year in which the entity has been a member for at least three (3) full months.

Please do not include any confidential business information in your Annual Performance Report. Public access laws require IDEM to make the Annual Performance Report publicly available, which may include posting all portions of your report on the Indiana ESP Web site.

SECTION A		FACILITY INFORMATION	
Name of Facility		Total Interior Systems America, LLC	
Name of Parent Company (if applicable)		Toyota Boshoku America	
Street Address (number and street)		1698 S CR 100W	
City/State/ZIP Code		Princeton, IN 47670	
Facility/Company Web site			
CONTACT INFORMATION			
Contact Name (Mr./Mrs./Ms./Dr.)		Mr. Pat Summers	
Title		EHS Manager	
Telephone number		812-253-7106	
FAX number		812-253-7175	
E-mail address		psummers@tisa1.com	
Mailing Address (if different from facility address)			
City/State/ZIP Code		Princeton, IN 47670	
Reporting Period Dates		1-1-08 through 12-31-08	
If this is your third Annual Performance Report, do you wish to renew your Indiana Environmental Stewardship Program membership?			
<input checked="" type="checkbox"/> Yes---If yes, please complete all sections of this annual report.			
<input type="checkbox"/> No---If no, you can skip Section D of this annual report.			
CHANGE IN INFORMATION			
In your ESP application and, perhaps, in previous annual performance reports, you described what your facility does or makes. Have there been any changes or additions to your facility's list of products or activities? If so, please list them in the space below.			
<input type="checkbox"/> Yes <input checked="" type="checkbox"/> No			

SECTION C ENVIRONMENTAL IMPROVEMENT INITIATIVE RESULTS**Why do we need this information?**

Facilities need to share the results of the environmental improvement initiative that was pursued during the reporting period.

What do you need to do?

Use the following table to summarize your facility's environmental performance as compared to your ESP environmental improvement initiative.

Category: **Energy Use**Aspect: **Electricity usage**

Specific Information on Aspect (optional):

	Baseline	Progress during year 2008	Environmental Improvement Initiative Goal	Cost Savings (if applicable)
Actual Quantity (per year)	3,771(2006 total)	3,057	3352	Target was 5% reduction. Actual was 9% reduction.
Measurement Unit	MTC02	MTC02	MTC02	
Normalized Quantity (per year)	3,771 MTC02	3,057 MTC02	3,582 MTC02	
Basis for your Normalizing Factor (e.g., gallons of paint produced)	MTC02 from electricity usage	MTC02 from electricity usage	MTC02 from electricity usage	

Briefly describe how you achieved improvements for this aspect or, if relevant, any circumstances that delayed progress.

Managed lighting requirements and turned off non-essential lighting and equipment during non-essential time periods, standardized HVAC settings to reduce electrical usage.

Please list any state, EPA, or other partnership programs to which you are reporting this data (e.g., Energy Star, Project XL).

(Optional) If your facility has experienced continued results for environmental improvement initiatives pursued in past years of ESP membership, please share those results here.

SECTION D ENVIRONMENTAL IMPROVEMENT INITIATIVES**Why do we need this information?**

Facilities need to demonstrate their commitment to improving environmental performance.

What do you need to do?

Refer to the Environmental Performance Table.

For ESP membership, you must identify three (3) environmental improvement initiatives for each 3-year membership term. One (1) initiative was identified in the application and the remaining will be identified each year in the annual report. Identify the new initiative that will begin this year by answering the following questions. Choose an indicator from the Environmental Performance Indicator Table to measure the identified environmental initiative. The Environmental Performance Indicator Table is provided with the ESP Application and is also available at <http://www.in.gov/idep/prevention/esp/table.doc>. The indicator you select for your initiative should be related to the objectives and targets in your EMS. Where possible, indicators should also be identified as having a significant environmental impact in your EMS. No more than two of your indicators can be from the same environmental category during the 3-year term. If you are not sure how your objectives and targets fit into the indicators from the Environmental Performance Indicator Table or whether your indicators are significant, call IDEM at 800-988-7901.

Please complete the following questions according to the environmental indicator you selected from the Environmental Performance Indicator Table. Additional information is required for air, hazardous waste, solid waste, and energy indicators as requested in Appendix 1.

1a What category have you selected from the Environmental Performance Table? (If the category is Energy Use, Waste, or Air Emissions for Total GHGs, please turn to Appendix 1 to complete additional questions pertaining to the category you have selected.) **Waste**

1b What indicator have you selected from the Environmental Performance Table? **Pounds generated per seat set**

1c All measurements should represent the performance level for the indicator across the entire facility. For many indicators, you may choose to focus your initiative on a specific subset of the indicator (e.g., a specific material, process, VOC, group of toxic air emissions, or particular waste component). Does your initiative include everything covered by the indicator (e.g., all VOCs, all non-hazardous waste), or a specific process, substance, or component (e.g., ethane, cardboard)?

- ☐ All
☒ Specific

If your initiative is specific to a substance or component, please provide additional detail on your indicator (e.g., specific chemical to be reduced, specific waste component). **Hazardous waste generated from adhesive usage**

1d What activities or process changes do you plan to undertake at your facility to accomplish your initiative (e.g., technology changes in a particular process line, employee training)? **Change in process**

2a Does this initiative address a significant aspect in your EMS?

- ☒ Yes
☐ No

2b If no, please explain why you believe this indicator should be included as an environmental improvement initiative.

how has ESP been instrumental in achieving registration?

NA

4. Explain the measured or perceived results from receiving, documenting, and responding to external communication.

NA

5. How have community residents and businesses reacted to your facility participating in the Indiana Environmental Stewardship Program?

Positive comments from the community and our customer

6. According to the measurement program developed and implemented by your facility to measure Environmental Management System success, is your facility's EMS successful? Why or why not? If not, what changes will be made to ensure continual environmental improvement and future EMS success?

Yes, based on key performance indicators that are tracked, EMS is successful.

CERTIFICATION AND PLEDGE

On behalf of **Total Interior Systems America** (name of facility),

I certify that the information contained in this Annual Performance Report and attachments is accurate to the best of my knowledge and that this facility is, to the best of my knowledge and based on reasonable inquiry, currently in compliance with all applicable federal, state, and local environmental requirements, or has a corrective action program in place to attain compliance.

We, **TISA**, commit to maintaining the principles and goals outlined in our Environmental Management System for our facility's Indiana Environmental Stewardship Program status. We agree to strive for full compliance with all regulations promulgated by the U.S. EPA, state, or local jurisdictions. We agree to promote the Indiana Environmental Stewardship Program and to share our success stories with other facilities. We understand that the Annual Performance Report must be submitted to IDEM by April 1st of each year and that we must reapply to the Indiana Environmental Stewardship Program every three years.

I understand that the information provided in this Annual Performance Report will be public record. I am the senior facility manager or authorized facility signatory, and fully authorized to execute this statement on behalf of the corporation or other legal entity whose facility is submitting this Annual Performance Report.

Signature

Pat Summers

Title

Environmental, Health and Safety
Manager

Date (month, day, year)

03/18/2009

Please mail, fax, or e-mail your completed Environmental Stewardship Program Annual Performance Report to:

IDEM-OPPTA
ESP Program Manager
MC 64-00 IGCS W041
100 North Senate Avenue
Indianapolis, IN 46204-2251

FAX: 317-233-5627
E-mail: esp@idem.IN.gov

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Pat Summers	Environmental, Health and Safety Manager	03/18/2009

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Waste - Non-Hazardous Waste Generation

In the table below, please enter your facility's amount of non-hazardous waste, broken down by waste management method. Please enter both the amounts you manage currently and that you intend to manage in your future reporting year. "Waste" is defined as all materials sent off-site that are neither product nor product packaging.

3a Is the goal of your non-hazardous waste commitment to:

- ☐ Reduce non-hazardous waste
☐ Improve waste management methods
☐ Combination of both strategies

3b How much of your waste is handled using each management method?

Method of Waste Managed	Baseline Year 20__	Future Year 20__	Units
Landfill			
Incineration			
Reused/recycled off-site			
Other management - Specify: _____			
Total Non-Hazardous Waste			

Waste - Hazardous Waste Generation

In the table below, please enter your facility's amount of hazardous waste, broken down by waste management method. Please enter both the amounts that you manage currently and that you intend to manage in your future reporting year. Include all hazardous waste that is treated on-site or sent off-site.

3a Is the goal of your hazardous waste commitment to:

- ☒ Reduce hazardous waste
☐ Improve waste management methods
☐ Combination of both strategies

3b How much of your hazardous waste is handled using each management method?

Method of Waste Managed	Baseline Year 2008	Future Year 2009	Units
Landfill			
Incineration			
Reused/recycled off-site	.13	.12	Pounds/seat set
Treated on-site			
Other management Specify: _____			
Total Hazardous Waste	.13	.12	Pounds/seat set